

AUG 25 2005

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) ONYX1046.ORD	
CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 C.F.R. 1.8) I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents, United States Patent and Trademark Office, (Fax No. 571-273-8300) on the date indicated. on <u>25 August 2005</u> Signature <u>Gary R. Fabian</u> Typed or printed name <u>Gary R Fabian</u>		In re Application of A. Williams	
		Application Number 09/410,462	Filed 1 Oct 1999
		For A Single Agent Method for Killing Tumor...	
		Art Unit 1635	Examiner J.E. Angell
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.			
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))		\$ 500.00	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:		\$ 250.00	
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>15-0615</u> . I have enclosed a duplicate copy of this sheet.			
<input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the		<u>Gary R Fabian</u> Signature Gary R. Fabian, Ph.D. Typed or printed name	
<input type="checkbox"/> applicant/inventor.		650-780-9030 Telephone number	
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71, Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98)		25 August 2005 Date	
<input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>33,875</u>			
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/> Total of <u>One</u> forms are submitted.		08/26/2005 TL0111 00000025 150615 094 0462 02 FC:2401 250.00 DA	